

<b>SCC eFile</b>	<b>2013 ANNUAL REPORT</b> <b>COMMONWEALTH OF VIRGINIA</b> <b>STATE CORPORATION COMMISSION</b>	<b>213507828</b>						
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>1.) CORPORATION NAME:  <b>Reynolds American Inc.</b></p> <p>2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS:  <b>CORPORATION SERVICE COMPANY</b>  <b>Bank of America Center, 16th Floor</b>  <b>1111 East Main Street</b></p> <p><b>RICHMOND, VA 23219</b></p> </div> <div style="width: 35%;"> <p>DUE DATE: <b>2/28/2013</b></p> <p>SCC ID NO: <b>F1699141</b></p> </div> </div>								
<div style="display: flex; justify-content: space-between;"> <div style="width: 60%;"> <p>3.) CITY OR COUNTY OF VA REGISTERED OFFICE:  <b>RICHMOND CITY</b></p> <p>4.) STATE OR COUNTRY OF INCORPORATION:  <b>NC</b></p> </div> <div style="width: 35%;"> <p>5.) STOCK INFORMATION</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLASS</th> <th style="width: 50%;">AUTHORIZED</th> </tr> <tr> <td>COMMON</td> <td>400,000,000</td> </tr> <tr> <td>PREFER</td> <td>100,000,000</td> </tr> </table> </div> </div>			CLASS	AUTHORIZED	COMMON	400,000,000	PREFER	100,000,000
CLASS	AUTHORIZED							
COMMON	400,000,000							
PREFER	100,000,000							
<p>6.) PRINCIPAL OFFICE ADDRESS:</p> <p style="text-align: center;">ADDRESS: 401 NORTH MAIN STREET</p> <p style="text-align: center;">CITY/ST/ZIP: WINSTON SALEM, NC 27101</p>								
<p>7.) DIRECTORS AND PRINCIPAL OFFICERS:      All directors and principal officers must be listed. An individual may be designated as both a director and an officer.</p>								
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: DANIEL M DELEN  TITLE: PRESIDENT/CEO  ADDRESS: 401 NORTH MAIN ST  CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: DANIEL M DELEN TITLE: PRESIDENT/CEO ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR	
NAME: DANIEL M DELEN TITLE: PRESIDENT/CEO ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: MCDARA P FOLAN, III  TITLE: SVP/DGC/SEC  ADDRESS: 401 NORTH MAIN ST  CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: MCDARA P FOLAN, III TITLE: SVP/DGC/SEC ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR	
NAME: MCDARA P FOLAN, III TITLE: SVP/DGC/SEC ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: PATRICK Z MESSICK  TITLE: ASST SECRETARY  ADDRESS: 401 NORTH MAIN ST  CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: PATRICK Z MESSICK TITLE: ASST SECRETARY ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR	
NAME: PATRICK Z MESSICK TITLE: ASST SECRETARY ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: DANIEL A FAWLEY  TITLE: SVP/TREAS  ADDRESS: 401 NORTH MAIN ST  CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: DANIEL A FAWLEY TITLE: SVP/TREAS ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR	
NAME: DANIEL A FAWLEY TITLE: SVP/TREAS ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: JOHN P DALY  TITLE: DIRECTOR  ADDRESS: 401 NORTH MAIN ST  CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: JOHN P DALY TITLE: DIRECTOR ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR	
NAME: JOHN P DALY TITLE: DIRECTOR ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR				
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%; vertical-align: top;"> NAME: MARTIN D FEINSTEIN  TITLE: DIRECTOR  ADDRESS: 401 NORTH MAIN ST  CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101 </td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">OFFICER</td> <td style="width: 5%; text-align: center; vertical-align: middle;"> <input checked="" type="checkbox"/> </td> <td style="width: 20%; text-align: center; vertical-align: middle;">DIRECTOR</td> </tr> </table>			NAME: MARTIN D FEINSTEIN TITLE: DIRECTOR ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR	
NAME: MARTIN D FEINSTEIN TITLE: DIRECTOR ADDRESS: 401 NORTH MAIN ST CITY/ST/ZIP/CO: WINSTON-SALEM, NC 27101	<input type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR				

NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LUC JOBIN DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	H RICHARD KAHLER DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HOLLY K KOEPPPEL DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NANA MENSAH DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	LIONEL L NOWELL III DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	HGL (HUGO) POWELL DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	THOMAS C WAJNERT DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	NEIL R WITHINGTON DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	JOHN J ZILLMER DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
NAME: TITLE: ADDRESS: CITY/ST/ZIP/CO:	E KENAN WHITEHURST DIRECTOR 401 NORTH MAIN ST WINSTON-SALEM, NC 27101	<input type="checkbox"/> OFFICER	<input checked="" type="checkbox"/> DIRECTOR
I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.			
/s/ PATRICK Z MESSICK SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PATRICK Z MESSICK, ASST SECRETARY PRINTED NAME AND CORPORATE TITLE	2/15/2013 DATE	
It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.			